

# STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

## DISCLOSURE REPORT CANDIDATE COMMITTEE

### SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name: (Must be same as on form CC-1)

Scott Saiki

(b) Committee Name:

Scott Saiki

(c) Mailing Address:

P O Box 12022

Honolulu, HI 96828-1022

(d) Phone: (Bus) (808) 527-2222 (Res) (808) 261-2402

Treasurer's

### SECTION II-TYPE OF REPORT AND REPORTING PERIOD:

Check Appropriate Box(es) 09/22/2002 through 10/21/2002

- ☐ 1st Preliminary Primary ☐ Amended  
☐ 2nd Preliminary Primary ☐ Short Form (11-212)  
☐ Final Primary ☐ Short Form (11-213)  
☒ Preliminary General ☐ Final  
☐ Final General  
☐ Supplemental

COPY

### SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section III (Part 2) on the Back of the Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
1. Cash on Hand at Beginning of Election Period (Continuing Committee) OR at the time Form CC-1 was Filed (New Committee)		1461.22
2. Cash on Hand at Beginning of this Reporting Period	12336.80	
3. Total Receipts with Loans (From Line 17, Column A and B)	4181.77	64116.34
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)	16518.57	65577.56
5. Subtotal Disbursements (From Line 21, Column A and B)	5864.99	54923.98
6. Cash on Hand at Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B)	10653.58	10653.58
7. (a) Total of Expenditures and Fundraising Expenditures (Unpaid) at Beginning of this Reporting Period	3104.21	
(b) Net Change of Expenditures and Fundraising Expenditures (Unpaid) (From Line 22, Column A)	-3104.21	
(c) Total of Expenditures and Fundraising Expenditures (Unpaid) at Closing of this Reporting Period (Add Lines 7(a) and 7(b))	0.00	
8. Total of Loans at Closing of this Reporting Period (Schedule E, Line 10)	0.00	
9. Debts Owed BY the Candidate Committee at Closing of this Reporting Period (Add Lines 7(c) and 8)	0.00	
10. Other Adjustments to Surplus/Deficit (Attach Explanation)	0.00	
11. Subtotal (Add Lines 9 and 10)	0.00	
12. Surplus/Deficit (Subtract Line 11 from Line 6)	10653.58	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

James C. Saiki

10-25-02

Candidate

Date

Scott Saiki

Treasurer

10-25-02

Date

Form CC-5(7/95)

**SECTION III (Part 2)-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**  
(If Necessary, Complete Schedules A through H Before Completing This Section)

Scott Saiki - Scott Saiki

	<b>COLUMN A</b>	<b>COLUMN B</b>
<b>RECEIPTS</b>	<b>TOTAL THIS PERIOD</b>	<b>ELECTION PERIOD TOTAL TO DATE</b>
<b>13. Contributions From:</b>		
<b>(a) Individuals/Other Entities/Noncandidate Committees</b>		
(i) Monetary Contributions of \$100 or Less	300.00	12865.00
(ii) Non-Monetary Contributions of \$100 or Less	0.00	0.00
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule A, Line 2 for Column A)	2879.38	48604.13
(iv) Total Contributions from Individuals/Other Entities/Noncandidate Committees (Add Lines (a)(i) through (a)(iii) for Columns A and B)	3179.38	61469.13
<b>(b) Political Party Committees</b>		
(i) Monetary Contributions of \$100 or Less	0.00	100.00
(ii) Non-Monetary Contributions of \$100 or Less	0.00	0.00
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule G, Line 2 for Column A)	1000.00	2500.00
(iv) Total Contributions from Political Party Committees (Add Lines (b)(i) through (b)(iii) for Columns A and B)	1000.00	2600.00
<b>(c) Candidate and Candidate's Immediate Family</b>		
(i) Monetary Contributions of \$100 or Less	0.00	0.00
(ii) Non-Monetary Contributions of \$100 or Less	0.00	0.00
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule D, Line 2 for Column A)	0.00	0.00
(iv) Total Contributions from Candidate and Candidate's Immediate Family (Add Lines (c)(i) through (c)(iii) for Columns A and B)	0.00	0.00
<b>(d) Total Contributions (Add Lines 13(a)(iv), 13(b)(iv) and 13(c)(iv) for Columns       A and B)</b>	4179.38	64069.13
<b>14. Public Funds and Other Receipts (Interest, Refunds, Etc.) (Schedule C, Line 2 for     Column A)</b>	2.39	47.21
<b>15. Total Receipts without Loans (Add Lines 13(d) and 14 for Columns A and B)</b>	4181.77	64116.34
<b>16. Loans</b>		
(a) Candidate and Candidate's Immediate Family (Schedule E, Line 1 for Column A)	0.00	0.00
(b) Financial Institutions (Schedule E, Line 4 for Column A)	0.00	0.00
(c) Other Loans (Schedule E, Line 7 for Column A)	0.00	0.00
(d) Total Loans (Add Lines 16(a) through 16(c) for Columns A and B)	0.00	0.00
<b>17. Total Receipts with Loans (Add Lines 15 and 16(d) for Columns A and B)</b>	4181.77	64116.34
<b>DISBURSEMENTS</b>		
<b>18. Expenditures (Schedule B, Line 3 for Column A)</b>	5864.99	54923.98
<b>19. Fundraising Expenditures (Schedule F, Line 3 for Column A)</b>	0.00	4794.47
<b>20. Loan Repayments</b>		
(a) Candidate and Candidate's Immediate Family (Schedule E, Line 2 for Column A)	0.00	0.00
(b) Financial Institutions (Schedule E, Line 5 for Column A)	0.00	0.00
(c) Other Loans (Schedule E, Line 8 for Column A)	0.00	0.00
(d) Total Loan Repayments (Add Lines 20(a) through 20(c) for Columns A and B)	0.00	0.00
<b>21. Subtotal Disbursements (Add Lines 18, 19, and 20(d) for Columns A and B)</b>	5864.99	54923.98
<b>22. Expenditures and Fundraising Expenditures (Unpaid) (Schedule H, Line 7 for     Column A) (Net Change This Period)</b>	-3104.21	0.00
<b>23. Total Disbursements (Add Lines 21 through 22 for Columns A and B)</b>	2760.78	54923.98

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION  
SCHEDULE A**

**INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100  
CANDIDATE COMMITTEE**

REMINDED: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 1

Scott Saiki - Scott Saiki

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF INDIVIDUAL)	OCCUPATION (IF INDIVIDUAL)		
09/17/2002 09/27/2002	[ ] NON-MONETARY CONTRIBUTION Ronald Zlatoper 1001 Kamokila Blvd. Kapolei, HI 96707-		\$350.00	\$350.00
09/19/2002 09/24/2002	[ ] NON-MONETARY CONTRIBUTION Bob Deyoung 796 Isenberg St. No. 17-C Honolulu, HI 96826-2910		\$200.00	\$200.00
09/30/2002	[X] NON-MONETARY CONTRIBUTION Stryker Weiner & Yokota 737 Bishop St. Suite 2860 Honolulu, HI 96813-		\$1129.38	\$1129.38
10/04/2002 10/04/2002	[ ] NON-MONETARY CONTRIBUTION Altres, Inc. 967 Kapiolani Blvd. Honolulu, HI 96814-		\$200.00	\$200.00
10/11/2002 10/11/2002	[ ] NON-MONETARY CONTRIBUTION Hawaii Assoc of Realtors PAC 1136 12th Avenue Suite 220 Honolulu, HI 96816-		\$1000.00	\$1300.00
	[ ] NON-MONETARY CONTRIBUTION			
	[ ] NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE) \$2879.38

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD \$2879.38  
(LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A)

**STATE OF HAWAII**  
**CAMPAIGN SPENDING COMMISSION**  
**SCHEDULE B**  
**EXPENDITURES**  
**CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 2

Scott Saiki - Scott Saiki

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
09/30/2002	Stryker Weiner & Yokota 737 Bishop St. Suite 2860 Honolulu, HI 96813-	Media Ad Production: Production services	\$1129.38
10/02/2002	Pro Lab - George Kodama State Capital Room 417 Honolulu, HI 96813-	Miscellaneous	\$7.50

- ↓  
\$1136.88
- SUBTOTAL OF EXPENDITURES (PAID) THIS PERIOD (THIS PAGE) \_\_\_\_\_
  - TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM FORM CC-5, (H) (SCHEDULE H), LINE 4) \_\_\_\_\_
  - TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL FROM FORM CC-5, SECTION B(PART 2), LINE 18, COLUMN A) \_\_\_\_\_

**STATE OF HAWAII**  
**CAMPAIGN SPENDING COMMISSION**  
**SCHEDULE B**  
**EXPENDITURES**  
**CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE

2 OF

2

Scott Saiki - Scott Saiki

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
10/07/2002	Cane Haul Road 2842 South King Street Honolulu, HI 96826-	Advertising : t-shirts	\$347.28
10/07/2002	Scott Saiki P O Box 12022 Honolulu, HI 96828-1022	Advertising : Island Sign Service 875 Waimanu Rd. #319, Honolulu 96813 signs	\$194.27
10/16/2002	Scott Saiki P O Box 12022 Honolulu, HI 96828-1022	Food & Beverages : Payao Thai Cuisine 500 Ala Moana Blvd. #1E Honolulu 96813	\$96.72
10/16/2002	Scott Saiki P O Box 12022 Honolulu, HI 96828-1022	Food & Beverages : Sumo Bento & Catering 1502 Liliha St. Honolulu 96817	\$57.00
10/16/2002	Scott Saiki P O Box 12022 Honolulu, HI 96828-1022	Food & Beverages : Karen's Kitchen (808) 597-8195	\$20.62
10/16/2002	Friends of Ala Wai 831 Pumehana Honolulu, HI 96815-	Community Organizations : Halloween event	\$25.00
10/18/2002	DMM Enterprises 359 Pakauwili Drive Wahiawa, HI 96786-	Postage/Mailing : mailouts	\$883.01

- SUBTOTAL OF EXPENDITURES (PAID) THIS PERIOD (THIS PAGE) \_\_\_\_\_
- TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM FORM CC-5, (H) (SCHEDULE H), LINE 4) \_\_\_\_\_
- TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL FROM FORM CC-5, SECTION III(PART 2), LINE 1B, COLUMN A) \_\_\_\_\_

\$1623.90

\$3104.21

\$5864.99

Form CC-5(B)(7/95)

# STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

## SCHEDULE H EXPENDITURES AND FUNDRAISING EXPENDITURES (UNPAID) CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 1

Scott Saiki - Scott Saiki

DATE OF EXPENDITURE OR FUNDRAISING EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR	NEW UNPAID EXPENDITURE OR INCREASE IN UNPAID EXPENDITURE AMOUNT THIS PERIOD	NEW UNPAID FUNDRAISING EXPENDITURE OR INCREASE IN UNPAID FUNDRAISING EXPENDITURE THIS PERIOD	TOTAL OF NEW UNPAID EXPENDITURE AND FUNDRAISING EXPENDITURE THIS PERIOD
	PURPOSE OF EXPENDITURE OR FUNDRAISING EXPENDITURE			

1. NEW UNPAID EXPENDITURES THIS PERIOD \$0.00
2. NEW UNPAID FUNDRAISING EXPENDITURES THIS PERIOD \$0.00
3. TOTAL OF NEW UNPAID EXPENDITURES AND FUNDRAISING EXPENDITURES THIS PERIOD \$0.00
4. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (DO NOT ITEMIZE. ENTER TOTAL HERE AND ON SCHEDULE F, LINE 2) 3104.21
5. TOTAL OF UNPAID FUNDRAISING EXPENDITURES PAID THIS PERIOD (DO NOT ITEMIZE. ENTER TOTAL HERE AND ON SCHEDULE G, LINE 2) \$0.00
6. TOTAL OF UNPAID EXPENDITURES AND FUNDRAISING EXPENDITURES PAID THIS PERIOD (ADD LINES 4 AND 5) 3104.21
7. NET CHANGE THIS PERIOD (SUBTRACT LINE 6 FROM LINE 3. ENTER TOTAL ON FORM CC-5, SECTION II (PART 2), LINE 22, COLUMN A) <3104.21>